

Access DB# 74320**SEARCH REQUEST FORM**

Scientific and Technical Information Center

Requester's Full Name: Paul Prebille Examiner #: 65450 Date: 08-28-02
Art Unit: 3738 Phone Number 308-2905 Serial Number: 09/903831
Mail Box and Bldg/Room Location: CP2-2027 Results Format Preferred (circle): PAPER ~~DISK~~ ~~E-MAIL~~

If more than one search is submitted, please prioritize searches in order of need.

Please provide a detailed statement of the search topic, and describe as specifically as possible the subject matter to be searched.

Include the elected species or structures, keywords, synonyms, acronyms, and registry numbers, and combine with the concept or utility of the invention. Define any terms that may have a special meaning. Give examples or relevant citations, authors, etc, if known. Please attach a copy of the cover sheet, pertinent claims, and abstract:

Title of Invention: Extravascular Bypass Grafting Method Utilizing An Intravascular ApproachInventors (please provide full names): Thomas J. MaginotEarliest Priority Filing Date: 07/03/91**For Sequence Searches Only* Please include all pertinent information (parent, child, divisional, or issued patent numbers) along with the appropriate serial number.*

Please search for the surgical procedure
outlined in the attached claims.

Best Available Copy

STAFF USE ONLYSearcher: JEANNE HERRIGANSearcher Phone #: 305-5934Searcher Location: CP2-2008Date Searcher Picked Up: 9/11Date Completed: 9/11Searcher Prep & Review Time: 78

Clerical Prep Time: _____

Online Time: 32**Type of Search**

NA Sequence (#) _____

AA Sequence (#) _____

Structure (#) _____

Bibliographic ✓

Litigation _____

Fulltext _____

Patent Family _____

Other _____

Vendors and cost where applicable

STN _____

Dialog ✓

Questel/Orbit _____

Dr.Link _____

Lexis/Nexis _____


Sequence Systems _____

WWW/Internet _____

Other (specify) _____

September 11, 2002

TO: Paul Prebilic, Art Unit 3738
CP2, Room 2-D-27

FROM: Jeanne Horrigan, EIC-3700 

SUBJECT: Search Results for Serial #09/903831

Attached are the search results for the "Extravascular Bypass Grafting Method Using an Intravascular Approach," including results of prior art and inventor searches in foreign patent databases, and prior art searches in medical and general sci/tech non-patent databases.

In the results, a highlighted line marks the end of a search, including the search strategy, in a particular set of databases and the beginning of a new search in a different set of databases.

I tagged the items that seemed to me to be most relevant, but **I suggest that you review all of the results. (I am not certain that I grasped the concept; I'll be happy to modify the search if the search strategy does not adequately cover the concept.)**

Also attached is a "*Search Results Feedback Form*." Your feedback will help enhance our search services.

I hope these results are useful. Please let me know if you would like me to expand or modify the search or if you have any questions.

1/26, TI/1 (Item 1 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
013718098

WPI Acc No: 2001-202322/200120

Catheter system has locking mechanism with internally threaded member that meshes with either of two sets of external threads to lock working catheter in operative or stowed position

1/26, TI/2 (Item 2 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
013605928

WPI Acc No: 2001-090136/200110

Catheter system for use in e.g., hemodialysis or plasmapheresis includes guide catheter, original dialysis catheter, replacement catheter and cap

1/26, TI/3 (Item 3 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
012865945

WPI Acc No: 2000-037778/200003

Blood flow maintaining method in long-term dialysis catheter system

1/26, TI/8 (Item 8 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
010456573

WPI Acc No: 1995-357892/199546

Graft and stent assembly for treating vascular disease - has orifice with end portion positionable in blood vessel adjacent sidewall with stent positionable securing end portion to graft.

1/7/4 (Item 4 from file: 350)
DIALOG(R) File 350: Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
012826710 **Image available**

WPI Acc No: 1999-632942/199954

Blood flow directing method using stent and graft assembly

Patent Assignee: MAGINOT VASCULAR SYSTEMS (MAGI-N)

Inventor: MAGINOT T J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5979455	A	19991109	US 91725597	A	19910703	199954 B
			US 9356371	A	19930503	
			US 93138912	A	19931018	
			US 95391960	A	19950221	
			US 96702742	A	19960823	
			US 9873336	A	19980505	

Priority Applications (No Type Date): US 9356371 A 19930503; US 91725597 A 19910703; US 93138912 A 19931018; US 95391960 A 19950221; US 96702742 A 19960823; US 9873336 A 19980505

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
US 5979455	A	38	A61F-002/06	CIP of application US 91725597

Div ex application US 9356371
Cont of application US 93138912
Cont of application US 95391960
Cont of application US 96702742
CIP of patent US 5211683
Div ex patent US 5304220
Cont of patent US 5456712
Cont of patent US 5571167
Cont of patent US 5749375

Abstract (Basic): US 5979455 A

NOVELTY - The stent and graft assembly is positioned such that the side wall of stent (90) conforms to that of aorta (16). The graft prosthesis orifice is positioned relative to the stent side wall so that blood flows into it via stent side wall. The blood flow advances through an upstream end of stent into its central passage, from which it advances into the graft prosthesis orifice through the stent side wall.

DETAILED DESCRIPTION - The stent includes many intersecting bars which define the stent side wall. The positioning step includes deforming the stent from an expanded configuration to an expanded configuration. The intersecting bars have specific orientation relative to each other for two configurations. The intersecting bars further define the stent side wall apertures. The orifice of the graft prosthesis is at the upstream end of the graft prosthesis. Blood flow advances from its upstream end to downstream end in order to bypass an occluded segment of the aorta. The graft (60) is secured to the stent and blood which enters the upstream end of stent is advanced into the graft.

USE - For directing blood flow in the body of a patient using stent and graft assembly for treatment of vascular disease.

ADVANTAGE - The graft prosthesis implanted in the body of the patient is less invasive than conventional procedure and only one surgical incision is made and hence the procedure has low morbidity and mortality risk to patient. The method can be performed on elderly or patients with poor pre-existing medical conditions. Cost is relatively less. An improved graft and stent assembly is provided which can be conveniently secured to the blood vessel. Implantation is easy. The stent and graft assembly functions well after it is implanted in the patient's body.

DESCRIPTION OF DRAWING(S) - The figure shows the 2 balloon- tip catheter removed from the blood vessel.

Aorta (16)

Graft (60)

Stent (90)

pp; 38 DwgNo 24/24

Derwent Class: P31; P32

International Patent Class (Main): A61F-002/06

International Patent Class (Additional): A61B-019/00

1/7/5 (Item 5 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

012651225 **Image available**

WPI Acc No: 1999-457330/199938

Method of securing an end portion of a graft to a blood vessel of a patient's circulatory system during bypass grafting procedure

Patent Assignee: MAGINOT VASCULAR SYSTEMS (MAGI-N)

Inventor: MAGINOT T J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5934286	A	19990810	US 91725597	A	19910703	199938 B
			US 9356371	A	19930503	
			US 93138912	A	19931018	
			US 95391960	A	19950221	
			US 96702742	A	19960823	
			US 9873336	A	19980505	
			US 9890598	A	19980604	

Priority Applications (No Type Date): US 9356371 A 19930503; US 91725597 A 19910703; US 93138912 A 19931018; US 95391960 A 19950221; US 96702742 A 19960823; US 9873336 A 19980505; US 9890598 A 19980604

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 5934286	A		39	A61B-017/08	CIP of application US 91725597 Div ex application US 9356371 Cont of application US 93138912 Cont of application US 95391960 Cont of application US 96702742 Cont of application US 9873336 CIP of patent US 5211683 Div ex patent US 5304220 Cont of patent US 5456712 Cont of patent US 5571167 Cont of patent US 5749375

Abstract (Basic): US 5934286 A

NOVELTY - The method includes inhibiting blood flow to a region of the circulatory system by inflating a number of balloons within the circulatory system, with the segment of the blood vessel being located in the region. The end portion of the graft is anastomosed to the segment during the blood flow inhibiting step. An arteriotomy is created in the side wall of the segment of the blood vessel while, a) all of the balloons are inflated within the circulatory system, and b) prior to the anastomosing step.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is included for implanting and end portion of the graft within the patient's body during a bypass grafting procedure.

USE - In treatment of vascular disease where blood vessels are narrowed by atherosclerosis, and where balloon catheters are used to inhibit blood flow to the anastomosis site.

ADVANTAGE - Graft implanting is less invasive compared with conventional bypass procedures. Low morbidity and mortality risk to patient. May be performed on elderly or frail patients with poor preexisting medical conditions. Graft and stent are easy to implant.

DESCRIPTION OF DRAWING(S) - The figure shows a second balloon tip catheter positioned within the blood vessel.

blood vessel (11)
renal artery (20)
catheter (22,26)
balloon (24,28)
laparoscope (37)
pp; 39 DwgNo 6/24

Derwent Class: P31

International Patent Class (Main): A61B-017/08

1/7/6 (Item 6 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
011879453 **Image available**
WPI Acc No: 1998-296363/199826

Method of implanting end portion of graft within body of patient during
bypass grafting - involves making arteriotomy in sidewall of blood
vessel, advancing end part of graft and then forming anastomosis between
graft end and blood vessel

Patent Assignee: MAGINOT T J (MAGI-I)

Inventor: MAGINOT T J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5749375	A	19980512	US 91725597	A	19910703	199826 B
			US 9356371	A	19930503	
			US 93138912	A	19931018	
			US 95391960	A	19950221	
			US 96702742	A	19960823	

Priority Applications (No Type Date): US 9356371 A 19930503; US 91725597 A
19910703; US 93138912 A 19931018; US 95391960 A 19950221; US 96702742 A
19960823

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 5749375	A		37	A61B-019/00	CIP of application US 91725597 Div ex application US 9356371 Cont of application US 93138912 Cont of application US 95391960 CIP of patent US 5221683 Div ex patent US 5304220 Cont of patent US 5456712 Cont of patent US 5571167

Abstract (Basic): US 5749375 A

The method comprises the steps of making an arteriotomy in a
sidewall of a blood vessel(11) at a first area to create a
communicating aperture between a first location inside of the blood
vessel and a second location outside of the blood vessel. The
arteriotomy making step is performed while the first area is covered by
a intact portion of the epidermis of the body(10). It then involves
advancing the end portion of the graft to the first area, where the
advancing step is performed while the first area is covered by the
intact portion of the epidermis of the body.

The method then involves forming an anastomosis between the end
portion of the graft and the blood vessel at the first area. The
anastomosis forming step is performed while the first area is covered
by the intact portion of the epidermis of the body. The anastomosis
forming step includes the step of securing the end portion of the graft
to the blood vessel at the first area with an expandable stent.

ADVANTAGE - I s less invasive relative to conventional surgical
bypass grafting procedures.

Dwg.7/24

Derwent Class: P31; P32

International Patent Class (Main): A61B-019/00

1/7/7 (Item 7 from file: 350)

DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
011008271 **Image available**
WPI Acc No: 1996-505221/199650

Method for producing by-pass grafting method for improving blood flow in treating vascular disease - involves securing ends to graft of bones and securing ends to vessel while exposing second location through incision to body and finally repeating above

Patent Assignee: MAGINOT T J (MAGI-I)

Inventor: MAGINOT T J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5571167	A	19961105	US 91725597	A	19910703	199650 B
			US 9356371	A	19930503	
			US 93138912	A	19931018	
			US 95391960	A	19950221	

Priority Applications (No Type Date): US 9356371 A 19930503; US 91725597 A 19910703; US 93138912 A 19931018; US 95391960 A 19950221

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 5571167	A		38	A61F-002/06	CIP of application US 91725597 Div ex application US 9356371 Cont of application US 93138912 CIP of patent US 5211683 Div ex patent US 5304220 Cont of patent US 5456712

Abstract (Basic): US 5571167 A

The method involves securing a first end of the graft to the blood vessel at a first location while the first location is covered by a substantially intact portion of the epidermis of the body. Then securing a second end of the graft to the blood vessel at a second location while the second location is exposed through an incision in the body.

The first end securing step comprises the step of securing the first end of the graft to the blood vessel with an expandable stent. The second end securing step comprises the step of suturing the second end of the graft to the blood vessel.

ADVANTAGE - Is less invasive relative to conventional surgical bypass grafting procedures.

Dwg.19A/24

Derwent Class: P32

International Patent Class (Main): A61F-002/06

1/7/9 (Item 9 from file: 350)

DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
009846478 **Image available**
WPI Acc No: 1994-126334/199415

Method for implanting graft prosthesis in body of patient to by-pass segment of blood vessel - involves first graft being anastomosed to blood vessel at first location and second to second location which is visually exposed through gaping surgical incision

Patent Assignee: MAGINOT T J (MAGI-I)

Inventor: MAGINOT T J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5304220	A	19940419	US 91725597	A	19910703	199415 B
			US 9356371	A	19930503	

Priority Applications (No Type Date): US 9356371 A 19930503; US 91725597 A 19910703

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 5304220	A		14	A61F-002/06	CIP of application US 91725597
					CIP of patent US 5211683

Abstract (Basic): US 5304220 A

A first end of the graft is anastomosed to the blood vessel at a first location which is covered by an intact portion of the epidermis of the body, and a second end of the graft is anastomosed to the blood vessel at a second location which is visually exposed through a gaping surgical incision. The first end of the graft includes a flanged end portion which is guided into the blood vessel through an arteriotomy defined near the first location so as to be positioned adjacent a portion of a sidewall of the blood vessel which surrounds the arteriotomy.

An expandable stent is then placed in the blood vessel, and in contact with the flanged end portion so as to secure the flanged end portion of the graft between the sidewall of the blood vessel and the stent thereby securing the graft to the blood vessel. The graft is further secured to the blood vessel by suturing the flanged end portion and the stent to the sidewall of the blood vessel. The second end of the graft is secured to the blood vessel at the second location by standard surgical techniques.

ADVANTAGE - Is less invasive relative to conventional surgical bypass grafting procedures and obviates at least one surgical incision (e.g. the abdominal surgical incision) are compared to conventional surgical bypass grafting procedures.

Dwg.1/24

Derwent Class: P31; P32

International Patent Class (Main): A61F-002/06

International Patent Class (Additional): A61B-019/00

1/7/10 (Item 10 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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009481768 **Image available**

WPI Acc No: 1993-175303/199321

Method of implanting graft prosthesis - involves forming anastomosis between one end of graft and blood vessel near upstream site

Patent Assignee: MAGINOT T J (MAGI-I)

Inventor: MAGINOT T J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5211683	A	19930518	US 91725597	A	19910703	199321 B

Priority Applications (No Type Date): US 91725597 A 19910703

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 5211683	A		33	A61B-019/00	

Abstract (Basic): US 5211683 A

A graft is positioned so that one end is located adjacent the blood vessel at a site upstream of the segment, and the other end is

similarly located downstream of the segment. The graft is advanced within the body with a medical instrument. A region of the area within the blood vessel near the upstream site is isolated from fluid communication with the rest of this area.

An arteriotomy is made in the sidewall of the blood vessel near the upstream site to create a communicating aperture between the upstream isolated region and the outside of the blood vessel. An anastomosis is then formed between the one end of the graft and the blood vessel near the upstream site.

USE/ADVANTAGE - For implanting a graft prosthesis in the body of a patient to bypass a segment of a blood vessel. Is less invasive than conventional procedures.

Dwg.1/24

Derwent Class: P31

International Patent Class (Main): A61B-019/00

File 350:Derwent WPIX 1963-2002/UD,UM &UP=200258

File 344:Chinese Patents Abs Aug 1985-2002/Aug

File 347:JAPIO Oct 1976-2002/May(Updated 020903)

File 371:French Patents 1961-2002/BOPI 200209

Set Items Description

S1 10 AU='MAGINOT T J'

File 348:EUROPEAN PATENTS 1978-2002/Sep W01

File 349:PCT FULLTEXT 1983-2002/UB=20020905,UT=20020829

>>>No sets currently exist

[Inventor's name is not listed in these two databases.]

3/6/1 (Item 1 from file: 5)

13753544 BIOSIS NO.: 200200382365

Endoscopic bypass grafting method utilizing an inguinal approach.
2002

3/6/2 (Item 2 from file: 5)

13062179 BIOSIS NO.: 200100269328

Catheter systems and associated methods utilizing removable inner catheter
or catheters.
2000

3/6/3 (Item 3 from file: 5)

12533886 BIOSIS NO.: 200000287388

Method for directing blood flow in the body of a patient with a graft and
stent assembly.
1999

3/6/4 (Item 4 from file: 5)

12531240 BIOSIS NO.: 200000284742

Long-term dialysis catheter system and associated method.
1999

3/6/5 (Item 5 from file: 5)

12167015 BIOSIS NO.: 199900461864

Bypass grafting method which uses a number of balloon catheters to inhibit
blood flow to an anastomosis site.

1999

3/6/6 (Item 6 from file: 5)
13480931 BIOSIS NO.: 200200109752
Method for implanting an end portion of a graft within the body of a
patient during a bypass grafting procedure.

1998

3/6/7 (Item 7 from file: 5)
13422526 BIOSIS NO.: 200200051347
Bypass grafting method
1996

3/6/8 (Item 8 from file: 5)
13401373 BIOSIS NO.: 200200030194
Graft and stent assembly
1995

3/6/9 (Item 9 from file: 155)
07958613 94094234 PMID: 8269434
Abdominal wall cellulitis and sepsis secondary to percutaneous cecostomy.
Sep-Oct 1993

3/6/10 (Item 10 from file: 155)
06910065 91216725 PMID: 1902439
Comparison of urokinase and tissue plasminogen activator for thrombolysis
in rats.
Jan 1991

File 155:MEDLINE(R) 1966-2002/Sep W2
File 5:BIOSIS Previews(R) 1969-2002/Sep W1
File 73:EMBASE 1974-2002/Aug W4
File 34:SciSearch(R) Cited Ref Sci 1990-2002/Sep W2
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
Set Items Description
S1 15 AU='MAGINOT T J':AU='MAGINOT TJ'
S2 10 RD (unique items)
S3 10 Sort S2/ALL/PY,D

14/7/1 (Item 1 from file: 155)
DIALOG(R)File 155:MEDLINE(R)
06323565 90019977 PMID: 2799653
A prospective study of clinically and endoscopically documented colonic
ischemia in 100 patients undergoing aortic reconstructive surgery with
aggressive colonic and direct pelvic revascularization, compared with
historic controls.
Zelenock G B; Strodel W E; Knol J A; Messina L M; Wakefield T W;
Lindenauer S M; Eckhauser F E; Greenfield L J; Stanley J C
Department of Surgery, University of Michigan Medical School, Ann Arbor.
Surgery (UNITED STATES) Oct 1989, 106 (4) p771-9; discussion 779-80,
ISSN 0039-6060 Journal Code: 0417347
Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: Completed

Clinically and endoscopically proved ischemia of the colon complicates elective aortic reconstruction in 1% to 2% and 6% to 7% of cases, respectively. Operative mortality exceeds 60% when transmural infarction occurs. A prospective study of colonic ischemia was undertaken in 100 male patients (mean age, 62.4 +/- 7.9 years) undergoing operation for aortic aneurysms (58) or aortoiliac occlusive disease (42). Conventional aortic surgery was undertaken in 88 patients, and in 12 patients adjunctive procedures to enhance colonic perfusion were performed 14 times, including IMA reimplantation (8), direct bypass to the internal iliac artery (4), and anastomosis of an aortofemoral bypass limb to adjacent common iliac artery (2). Colonoscopy was performed within 24 to 48 hours of aortic reconstruction. Three patients had endoscopic evidence of colonic ischemia. Transmural infarction did not develop in any patient, and bowel resections or diverting colostomies were not necessary. Three patients died, none manifesting colonic ischemia. The 12% utilization of adjunctive procedures to enhance blood flow in the colon was substantially greater than the 4% frequency of an earlier experience from our institution in which nearly half of the 5.7% operative mortality was attributed to colonic infarction. Attention to factors contributing to ischemia of the colon, and more frequent adjunctive revascularization of the colon, may lessen this complication of aortic reconstructive surgery.

Record Date Created: 19891106

14/7/2 (Item 1 from file: 94)
DIALOG(R)File 94:JICST-EPlus
(c)2002 Japan Science and Tech Corp(JST). All rts. reserv.
00752437 JICST ACCESSION NUMBER: 89A0482882 FILE SEGMENT: JICST-E
A case of balloon angioplasty for the stenosis occurred after femoropopliteal bypass operation.
HAYASHI SAIHOU (1); KANEHIRO KEIICHI (1); SUEDA TAIJIRO (1); HAMANAKA YOSHIHARU (1); ISHIHARA HIROSHI (1)
(1) Hiroshima Univ., School of Medicine
Nihon Rinsho Geka Gakkai Zasshi(Journal of Japan Surgical Association),
1989, VOL.50,NO.3, PAGE.627-630, FIG.6, REF.6
JOURNAL NUMBER: Z0103AAF ISSN NO: 0386-9776
UNIVERSAL DECIMAL CLASSIFICATION: 616.13/.14+.42 616.12-089
LANGUAGE: Japanese COUNTRY OF PUBLICATION: Japan
DOCUMENT TYPE: Journal
ARTICLE TYPE: Original paper
MEDIA TYPE: Printed Publication
ABSTRACT: We experienced a rare case of arterial stenosis caused by bulldog forceps used in femoropopliteal bypass operation. A 70-year-old female visited our department complaining of pain in the right lower extremity. Various examinations indicated that she was suffered from complete obstruction of the superficial femoral artery due to arteriosclerosis obliterans. Femoropopliteal bypass operation was performed. Postoperative roentgenography revealed a stenosis at a place beneath the graft anastomosis, namely, at a place where bulldog forceps appeared to be applied. Basic endoscopical findings also supported the stenosis caused by hemostat. She was treated with angioplasty by inserting a balloon through the resected artificial vessel, and her postoperative course was uneventful. Even a hemostat should be used with careful attention. Furthermore, intra-anginal endoscopy through the artificial vessel and balloon angioplasty are possible applicable diagnostic and therapeutic procedures to stenosis at the anastomosis.(author abst.)

22/6/1 (Item 1 from file: 155)

07094646 92027484 PMID: 1929196

[Diagnostic and therapeutic problems of aorto-enteric fistulas caused by aortic prostheses. 5 surgical cases of which 4 were successful]
Jun 1991

22/6/2 (Item 2 from file: 155)

06938597 91245632 PMID: 2038104

Angioscopically directed valvulotomy: a new valvulotome and technique.
Jun 1991

22/6/3 (Item 3 from file: 155)

06890797 91197686 PMID: 2015188

Angioscopy of arm vein infrainguinal bypass grafts .
Mar 1991

22/6/4 (Item 4 from file: 73)

04731801 EMBASE No: 1991225155

Aorto-enteric fistula after aortic surgery: 5 Cases
1991

22/6/5 (Item 5 from file: 34)

01299868 Genuine Article#: GM591 Number of References: 90

TRANSESOPHAGEAL ECHOCARDIOGRAPHY - PROCEDURES AND CLINICAL-APPLICATION

22/6/6 (Item 6 from file: 155)

06711162 91024561 PMID: 2222176

Angioscopy for intraoperative management of thromboembolism.
Oct 1990

22/6/7 (Item 7 from file: 155)

06637945 90334527 PMID: 2378565

A comparative study of intraoperative angioscopy and completion arteriography following femorodistal bypass .
Aug 1990

22/6/8 (Item 8 from file: 155)

06249563 89333155 PMID: 2787946

[The aorto-enteric fistula--a rare, but important cause of upper gastrointestinal hemorrhage]
May 1989

22/6/9 (Item 9 from file: 155)

06010630 89097629 PMID: 3264892

Infection and digestive bleeding: late complications of aortofemoral bypass surgery]
Dec 1988

22/6/10 (Item 10 from file: 155)

05888129 88311467 PMID: 3409514

Intraoperative decisions based on angioscopy in peripheral vascular surgery.
Sep 1988

22/6/11 (Item 11 from file: 155)

05698689 88119330 PMID: 2963147

Angioscopic thromboembolism: preliminary observations with a recent technique
Feb 1988

22/6/12 (Item 12 from file: 73)
03862557 EMBASE No: 1989031512
Enteric infection and bleeding: Tardive complications of aortofemoral bypasses
1988

22/6/14 (Item 14 from file: 73)
03389482 EMBASE No: 1987142059
Aorto-enteric fistulas
1987

22/6/15 (Item 15 from file: 155)
05263056 87011869 PMID: 3761479
Angioscopically monitored saphenous vein valvulotomy.
Oct 1986

22/6/17 (Item 17 from file: 73)
03143016 EMBASE No: 1986165593
Aortoenteric fistula. A 7 year urban experience
1986

22/6/18 (Item 18 from file: 155)
04786419 85172434 PMID: 3985288
Improvements in the diagnosis and management of aortoenteric fistula.
Apr 1985

22/6/19 (Item 19 from file: 155)
04746443 85125515 PMID: 3871680
Angioscopic visualization of blood vessel interior in animals and humans.
Feb 1985

22/6/20 (Item 20 from file: 73)
02856949 EMBASE No: 1985150908
Improvements in the diagnosis and management of aortoenteric fistula
1985

22/6/21 (Item 21 from file: 155)
04632769 85009922 PMID: 6481884
In vitro observations of greater saphenous vein valves during pulsatile
and nonpulsatile flow and following lysis.
Mar 1984

22/6/22 (Item 22 from file: 155)
03908107 82180410 PMID: 6978625
Recurrent aortoduodenal fistula: a lesson in management.
Mar 1982

22/6/23 (Item 23 from file: 73)
02157048 EMBASE No: 1982136184
Aortoduodenal fistulae following prosthetic repair surgery of the
abdominal aorta : Clinical experience with 9 cases
1982

22/6/24 (Item 24 from file: 73)
02077844 EMBASE No: 1982242938
Prevention of gastroduodenal complications in coronary surgery.

Usefulness of pre-operative fiberoscopy
1982

22/6/25 (Item 25 from file: 73)
01809954 EMBASE No: 1981244907
Aortoenteric fistula
1981

22/6/26 (Item 26 from file: 155)
03342463 80154859 PMID: 7363162
Aortoenteric fistulas: a preventable problem?
Jan 1980

22/6/27 (Item 27 from file: 73)
01919062 EMBASE No: 1981098226
Management of graft infections following abdominal aortic aneurysm replacement
1980

22/6/28 (Item 28 from file: 73)
01697836 EMBASE No: 1980066030
Aortic fistulas: a preventable problem?
1980

22/6/29 (Item 29 from file: 155)
03218913 80034227 PMID: 315056
[Gastrointestinal haemorrhage due to aorto-intestinal fistula. 3 cases
(author's transl)]
Jun 23 1979

22/6/30 (Item 30 from file: 73)
01705919 EMBASE No: 1980074193
A diagnostic and therapeutic approach to aortoenteric fistulas: Clinical
experience with twenty patients
1979

22/6/31 (Item 31 from file: 73)
01364095 EMBASE No: 1979084789
Technique of intraoperative endoscopic evaluation of occluded
aortofemoral grafts following thrombectomy
1979

22/7/13 (Item 13 from file: 155)
DIALOG(R) File 155:MEDLINE(R)
05764916 88189157 PMID: 3447039
**Vascular endoscopy using a flexible fiberscope with a thin external
diameter; experimental and clinical studies]**
Iwasaki M; Kamiya K; Akimoto S; Takayama Y; Matsukawa T; Ueno A
Second Department of Surgery, Yamanashi Medical College, Japan.
Nippon Geka Gakkai zasshi (JAPAN) Dec 1987, 88 (12) p1737-42, ISSN
0301-4894 Journal Code: 0405405
Document type: Journal Article ; English Abstract
Languages: JAPANESE
Main Citation Owner: NLM
Record type: Completed
The purpose of this study is to evaluate capability of a fiberscope with
a thin external diameter (2.5mm, Olympus PF25-L) in observing the inner

surface of blood vessels in animals and humans. **Vascular endoscopy** was firstly performed in three living dogs. The inner surface of canine abdominal aorta was not be fully inspected because of retrograde blood flow from the renal and lumbal arteries, but by blocking the proximal and distal blood flow using Fogarty catheters that of canine iliac artery including a flap of intima of 1mm diameter could be successfully observed. As clinical application of this endoscope the inspection of intravascular structures of Dardik's Biografts obliterated after peripheral bypass surgery were performed. In every case, bellows-like inner surface of this graft and several shapes of stenosis could be clearly recognized. Thus this endoscope presented the good optical quality, but due to lack of an angulating system visualization of anastomotic site was not achieved in most cases. No patient incurred complications of any sort. We conclude that vascular endoscopy using this type of endoscope can be performed safely, and provide useful information to the field of peripheral vascular surgery, but for the widespread clinical use of this vascular endoscopy, efforts should be made to improve the endoscope system itself and the method of effective interruption of blood flow.

Record Date Created: 19880524

22/7/16 (Item 16 from file: 155)
DIALOG(R) File 155:MEDLINE(R)
05263048 87011861 PMID: 3761471
Angioscopy as an adjunct to arterial reconstructive surgery: a preliminary report.

Seeger J M; Abela G S

Journal of vascular surgery : official publication, the Society for Vascular Surgery and International Society for Cardiovascular Surgery, North American Chapter (UNITED STATES) Oct 1986, 4 (4) p315-20, ISSN 0741-5214 Journal Code: 8407742

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

To date our use of angioscopy as an adjunct to in situ vein grafting, arterial embolectomy, femoropopliteal bypass surgery, and laser recanalization has been studied in 11 patients. Three angioscopes have been used: a 1.7 mm optiscope, a 2.8 mm laser optiscope, and a 3.2 mm bronchoscope. Scopes were introduced through an arteriotomy and a clear field maintained by continuous saline infusion. Twenty-four angioscopic evaluations were performed in the 14 patients studied. Adequate visualization was achieved with all three scopes. Angioscopy showed total atherosclerotic occlusion of six superficial femoral and popliteal arteries, intimal flaps in two arteries, thrombus in two arteries and one graft, adequate valvulotomy in three saphenous veins used for in situ bypass grafting, and removal of thrombus after embolectomy in one artery. With the 2.8 mm laser optiscope, the optical fiber used for laser recanalization could be positioned at the site of arterial occlusion before lasing and recanalization were done under direct vision. The 1.7 mm scope could be passed through the recanalized artery to inspect the channel and confirm communication with the artery distal to the occlusion. **Thus, angioscopy appears to be potentially useful as a diagnostic device in arterial occlusive disease and as an adjunct in in situ saphenous vein grafting or laser recanalization of occluded arterial segments.**

Record Date Created: 19861110

29/6/2 (Item 2 from file: 155)
05976498 89060031 PMID: 3143254

Hazards of angioscopic examination: documentation of damage to the
arterial intima.

Dec 1988

29/6/3 (Item 1 from file: 73)
03754990 EMBASE No: 1988204426

Coronary angiography during cardiac catheterization and cardiac surgery
1988

29/7/1 (Item 1 from file: 155)
DIALOG(R)File 155:MEDLINE(R)
07171383 92103469 PMID: 1760707

In situ femorodistal bypass: novel technique for angioscope-assisted
intraluminal side-branch occlusion and valvulotomy. A preliminary report.

Stierli P; Aeberhard P

Department of Surgery, Kantonsspital Aarau, Switzerland.

British journal of surgery (ENGLAND) Nov 1991, 78 (11) p1376-8,

ISSN 0007-1323 Journal Code: 0372553

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

To allow and facilitate complete endoluminal vein preparation under
angioscopic guidance for in situ femorodistal bypass grafting, a novel
instrument was constructed. In experiments in cadavers we developed the
occluder valvulotome, consisting of a modified Mills' valvulotome
containing a laterally-ending working channel, a retrograde cutting blade
and an advanceable Teflon tube within the working channel. Using this
instrument in combination with commercially available wire coils, we
successfully performed five femorocrural in situ reconstructions with
endoluminal valvulotomy and embolization of a total of ten thigh
tributaries. The technique allows angioscope-assisted valvulotomy and
simultaneous endoluminal tributary occlusion; making long skin incisions
and extensive vein dissection obsolete.

Record Date Created: 19920212

File 155:MEDLINE(R) 1966-2002/Sep W2
File 144:Pascal 1973-2002/Sep W2
File 5:Biosis Previews(R) 1969-2002/Sep W1
File 6:NTIS 1964-2002/Sep W3
File 8:Ei Compendex(R) 1970-2002/Sep W1
File 99:Wilson Appl. Sci & Tech Abs 1983-2002/Aug
File 238:Abs. in New Tech & Eng. 1981-2002/Aug
File 65:Inside Conferences 1993-2002/Sep W2
File 77:Conference Papers Index 1973-2002/Sep
File 73:EMBASE 1974-2002/Aug W4
File 34:SciSearch(R) Cited Ref Sci 1990-2002/Sep W2
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
File 94:JICST-EPlus 1985-2002/Jul W2
File 35:Dissertation Abs Online 1861-2002/Aug
Set Items Description
S1 520638 BLOOD()VESSEL OR AORTA
S2 382753 ENDOSCOP?
S3 162094 ANASTOMOS?

S4 30827 (ILIAC OR ILIUM) (5N) (ARTERI??? OR ARTERY)
S5 62720 (FEMUR OR FEMORAL) (5N) (ARTERY OR ARTERI???)
S6 995 INGUINAL()LIGAMENT?
S7 1248139 CONDUIT? ? OR TUBE? ? OR TUBING OR TUBELIKE OR PIPETTE? ? -
OR PIPET? ? OR DUCT? ?
S8 280353 BYPASS
S9 594634 GRAFT? ?
S10 28 S1 AND S2 AND S3 AND S4:S6 AND S7:S9
S11 22 S10/2002 OR S10/2001 OR S10/2000 OR S10/1999 OR S10/1998 OR
S10/1997
S12 3 S10/1996 OR S10/1995 OR S10/1994 OR S10/1993 OR S10/1992
S13 3 S10 NOT S11:S12
S14 2 **RD (unique items)**
S15 4178 S1 AND S2
S16 154 S8 AND S9 AND S15
S17 134 S16 NOT S10
S18 111 RD (unique items)
S19 63 S18/2002 OR S18/2001 OR S18/2000 OR S18/1999 OR S18/1998 OR
S18/1997
S20 17 S18/1996 OR S18/1995 OR S18/1994 OR S18/1993 OR S18/1992
S21 31 S18 NOT S19:S20
S22 31 **Sort S21/ALL/PY,D**
S23 3351 S8() (S9 OR GRAFTING) AND S4:S6
S24 48 S2 AND S23
S25 26 S24 NOT (S10 OR S16)
S26 15 S25/2002 OR S25/2001 OR S25/2000 OR S25/1999 OR S25/1998 OR
S25/1997
S27 8 S25/1996 OR S25/1995 OR S25/1994 OR S25/1993 OR S25/1992
S28 3 S25 NOT S26:S27
S29 3 **RD (unique items)**

11/6/1 (Item 1 from file: 442)

00046958

Arterial Mycotic Aneurysm and Rupture; A Potentially Fatal Complication of
Pancreas Transplantation in Diabetes Mellitus (ORIGINAL ARTICLES)
1989;

LINE COUNT: 00104 WORD COUNT: 01447

16/6/1 (Item 1 from file: 16)

07102705 Supplier Number: 60056981 (USE FORMAT 7 FOR FULLTEXT)

World's First Series of Pediatric Heart Surgeries Performed With Robotic
Assistance.

March 13, 2000

Word Count: 803

16/6/2 (Item 1 from file: 442)

00113138

Minimally Invasive Cardiac Surgery Defined (ARTICLE)

2000;

LINE COUNT: 00504

16/6/3 (Item 1 from file: 149)

01931041 SUPPLIER NUMBER: 65013860 (USE FORMAT 7 OR 9 FOR FULL TEXT)

Pain Location, Distribution, and Intensity After Cardiac Surgery(*)

2000

WORD COUNT: 4247 LINE COUNT: 00385

File 95:TEME-Technology & Management 1989-2002/Sep W2
File 98:General Sci Abs/Full-Text 1984-2002/Aug
File 9:Business & Industry(R) Jul/1994-2002/Sep 10
File 16:Gale Group PROMT(R) 1990-2002/Sep 11
File 160:Gale Group PROMT(R) 1972-1989
File 148:Gale Group Trade & Industry DB 1976-2002/Sep 11
File 636:Gale Group Newsletter DB(TM) 1987-2002/Sep 11
File 441:ESPICOM Pharm&Med DEVICE NEWS 2002/Sep W1
File 20:Dialog Global Reporter 1997-2002/Sep 11
File 442:AMA Journals 1982-2002/Aug B1
File 444:New England Journal of Med. 1985-2002/Sep W2
File 149:TGG Health&Wellness DB(SM) 1976-2002/Sep W1

Set	Items	Description
S1	24937	BLOOD()VESSEL OR AORTA
S2	31468	ENDOSCOP?
S3	4922	ANASTOMOS?
S4	1282	(ILIAC OR ILIUM) (5N) (ARTERI??? OR ARTERY)
S5	3921	(FEMUR OR FEMORAL) (5N) (ARTERY OR ARTERI???)
S6	263	INGUINAL()LIGAMENT?
S7	486877	CONDUIT? ? OR TUBE? ? OR TUBING OR TUBELIKE OR PIPETTE? ? - OR PIPET? ? OR DUCT? ?
S8	119367	BYPASS
S9	69328	GRAFT? ?
S10	1	S1(S)S2(S)S3(S)S4:S6
S11	1	S7:S9 AND S10
S12	11006	S8() (S9 OR GRAFTING)
S13	257	S2(10N)S12
S14	0	S1(10N)S13
S15	5	S1 AND S13
S16	3	RD (unique items)

10/26,TI/1 (Item 1 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
014668987
WPI Acc No: 2002-489691/200252

Anastomosis stent for inserting into blood vessel , comprises two termini and primary lumen providing fluid passage between termini and is made of non-polyglycolic acid material that is resorbable in preset days

10/26,TI/2 (Item 2 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
014035790
WPI Acc No: 2001-520003/200157

Anastomosis apparatus for stapling end of a graft vessel to wall of a blood vessel , comprises tubular shaft, positioning wire, piercing wire and anvil to provide a stopping surface for cutting blade and deflecting surface for the staple

10/26,TI/3 (Item 3 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.

014029775

WPI Acc No: 2001-513989/200156

Compression plate vascular anastomosis system has anvil with engaging end that has greater cross sectional area than cross sectional area defined by cutting perimeter of cutting device

10/26, TI/4 (Item 4 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

013905036

WPI Acc No: 2001-389249/200141

Intraluminally directed vascular anastomosis system has anvil pull that extends out of blood vessel and is received by cutting unit that forms opening to join blood vessel opening to another vessel opening

10/26, TI/5 (Item 5 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

012408354

WPI Acc No: 1999-214462/199918

Controlled cessation of heart beat during coronary bypass surgery,

10/7/6 (Item 6 from file: 350)

DIALOG(R) File 350: Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

011695650 **Image available**

WPI Acc No: 1998-112560/199811

Vascular prosthesis used e.g. during endoscopic surgery for treating blood vessel problems - has end collar which attached to outer or inner surface of adjoining duct or blood vessel

Patent Assignee: ASSOC LERICHE RENE (ASLE-N); ASSOC LERICHE ASSOC LOI 1901 RENE (ASLE-N)

Inventor: FABIANI J; ZEGDI R; FABIANI J N

Number of Countries: 019 Number of Patents: 003

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
EP 824012	A1	19980218	EP 97401882	A	19970805	199811 B
FR 2751867	A1	19980206	FR 969874	A	19960805	199813
US 5893886	A	19990413	US 97905934	A	19970805	199922

Priority Applications (No Type Date): FR 969874 A 19960805

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
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EP 824012	A1	F	8	A61F-002/06	
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Designated States (Regional): AT BE CH DE DK ES FI FR GB GR IE IT LI LU MC NL PT SE

FR 2751867	A1	14	A61F-002/06
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US 5893886	A		A61F-002/06
------------	---	--	-------------

Abstract (Basic): EP 824012 A

A vascular prosthesis, designed to be anastomosed to a lateral or terminal aperture in a duct (1) or blood vessel, has a collar (9) with an annular layer (9) and free edge (9a) made to be positioned immediately adjacent to the aperture. The collar is shaped to fit against the inner or outer surface of the aperture while keeping its free edge (9a) adjacent to the edge of the aperture. After fitting, the edges of the collar and aperture can be joined together by a series of clips (11).

For an end-to-end anastomosis the collar can be doubled over on the outside of the prosthesis and positioned inside the duct so that their edges are aligned to receive the clips.

ADVANTAGE - Gives simple, rapid and reliable anastomosis, with no need to cut prosthesis before fitting to duct or blood vessel aperture. Can be anastomosed without need for sewing onto a blood vessel.

Dwg. 5/13

Derwent Class: P31; P32; Q67

International Patent Class (Main): A61F-002/06

International Patent Class (Additional): A61B-017/11; F16L-031/00; F16L-031/02

10/7/7 (Item 7 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

011064713 **Image available**

WPI Acc No: 1997-042638/199704

Vascular anastomosis technique, useful for endoscopy - comprises insertion of stent contg. anti-thrombus drug, stapling blood vessel and melting stent, providing quicker and easier anastomosis

Patent Assignee: KHOURI BIOMEDICAL RES INC (KHOU-N)

Inventor: KHOURI R K

Number of Countries: 021 Number of Patents: 003

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 9633673	A1	19961031	WO 96US5815	A	19960426	199704 B
AU 9657160	A	19961118	AU 9657160	A	19960426	199710
US 5653744	A	19970805	US 95429897	A	19950427	199737

Priority Applications (No Type Date): US 95429897 A 19950427

Cited Patents: 4.Jnl.Ref; US 3908662; US 4770176; US 5141516; US 5276015; US 5464450

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
-----------	------	-----	----	----------	--------------

WO 9633673	A1	E	20	B	
------------	----	---	----	---	--

Designated States (National): AU CA JP

Designated States (Regional): AT BE CH DE DK ES FI FR GB GR IE IT LU MC NL PT SE

AU 9657160	A	B		Based on patent WO 9633673
------------	---	---	--	----------------------------

US 5653744	A	6	B	
------------	---	---	---	--

Abstract (Basic): WO 9633673 A

Vascular anastomosis technique comprises: (a) placing a biocompatible stent in the blood vessel; (b) applying staples to anastomose the vessel; and (c) converting the stent material into a blood miscible liq.

Also claimed are: (A) a temporary stent for use in anastomosis comprising: (i) biocompatible material which can convert to liquid miscible with blood; and (ii) a substance which prevents thrombus formation and/or intimal hyperplasia; (B) a method for preventing thrombus formation and/or intimal hyperplasia by admin. of substance to prevent thrombus formation and/or intimal hyperplasia; and (C) a temporary stent comprising: the components as in (A) but having opposing tapered surfaces which meet in the centre having cross-section area sized to fit snugly within the vessel.

ADVANTAGE - Use of temporary stent leads to quicker and easier anastomosis compared to suturing or using stapling alone, as it holds vessel edges together, everts them, and allows the stapler to apply pressure without catching the opposite wall. The method causes no

anastomotic stenosis and is esp. useful in endoscopy and end-to-side anastomoses. Also, the stent can deliver drugs to prevent thrombus formation or intimal hyperplasia.

Dwg.1/1

Abstract (Equivalent): US 5653744 A

A method for vascular anastomosis in a subject comprising:

(a) placing, in a vessel to be anastomosed, a stent comprising a biocompatible material; (b) applying staples to evert the edges of the vessel by pressing the staples against the vessel edges to thereby use the stent as an anvil to anastomose the vessel; and (c) converting the stent into a liquid that is miscible with blood.

Dwg.1/1

Derwent Class: A96; B07; D22; P32

International Patent Class (Main): A61F-002/06

12/26, TI/1 (Item 1 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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014268107

WPI Acc No: 2002-088805/200212

Endoscopic surgical instrument for trachea, esophagus, has node rotatably mounted within restraining braces at distal end of shaft to manipulate surgical tool, and camera for stereoscopic imaging of surgical area

12/26, TI/2 (Item 2 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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014253489

WPI Acc No: 2002-074189/200210

Inhibition of pain and inflammation at a wound during a surgical procedure involves delivering a dilute solution containing pain/inflammation inhibitory agents at low concentrations in a liquid carrier to the wound

12/26, TI/3 (Item 3 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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013547101

WPI Acc No: 2001-031307/200104

Suture-free clamp to seal e.g. patient's atrial tissue, during cardiothoracic surgery, has conical housing that enters medical device into body tissue, and connects with tissue clamping collar

13/26, TI/1 (Item 1 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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012408354

WPI Acc No: 1999-214462/199918

Controlled cessation of heart beat during coronary bypass surgery,

13/26, TI/2 (Item 2 from file: 350)

DIALOG(R) File 350: Derwent WPIX

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012063397

WPI Acc No: 1998-480308/199841

Arterial vessel harvesting method for coronary bypass grafting - involves occluding side branches from internal mammary artery selectively, for providing rear free end of artery for anastomosis with coronary artery

File 350:Derwent WPIX 1963-2002/UD,UM &UP=200258

File 344:Chinese Patents Abs Aug 1985-2002/Aug

File 347:JAPIO Oct 1976-2002/May(Updated 020903)

File 371:French Patents 1961-2002/BOPI 200209

Set	Items	Description
S1	11697	BLOOD()VESSEL OR AORTA
S2	25729	ENDOSCOP?
S3	1996	ANASTOMOS?
S4	110	(ILIAC OR ILIUM) (5N) (ARTERI??? OR ARTERY)
S5	383	(FEMUR OR FEMORAL) (5N) (ARTERY OR ARTERI???)
S6	27	INGUINAL()LIGAMENT?
S7	1027213	CONDUIT? ? OR TUBE? ? OR TUBING OR TUBELIKE OR PIPETTE? ? - OR PIPET? ? OR DUCT? ?
S8	45209	BYPASS
S9	43950	GRAFT? ?
S10	7	S1 AND S2 AND S3
S11	4	S1 AND S2 AND S4:S6
S12	3	S11 NOT S10
S13	2	S2 AND S3 AND S8 AND S9

11/6/1 (Item 1 from file: 348)

00686959

Surgical clip applier

11/6/2 (Item 1 from file: 349)

00909896 **Image available**

ENDOSCOPIC BEATING-HEART STABILIZER AND VESSEL OCCLUSION FASTENER

Publication Year: 2002 /

11/6/3 (Item 2 from file: 349)

00890436 **Image available**

RESORBABLE ANASTOMOSIS STENTS AND PLUGS AND THEIR USE IN PATIENTS

Publication Year: 2002

11/6/4 (Item 3 from file: 349)

00811882 **Image available**

EXTERNALLY DIRECTED ANASTOMOSIS SYSTEMS AND EXTERNALLY POSITIONED
ANASTOMOSIS FENESTRA CUTTING APPARATUS

Publication Year: 2001

11/6/5 (Item 4 from file: 349)

00810489 **Image available**

INTRALUMINALLY DIRECTED ANVIL APPARATUS AND RELATED METHODS AND SYSTEMS

Publication Year: 2001

11/6/6 (Item 5 from file: 349)

00810488 **Image available**

LOCKING COMPRESSION PLATE ANASTOMOSIS APPARATUS

Publication Year: 2001

11/6/7 (Item 6 from file: 349)

00810486 **Image available**
SYSTEMS FOR INTRALUMINALLY DIRECTED VASCULAR ANASTOMOSIS
Publication Year: 2001

11/6/8 (Item 7 from file: 349)
00810485 **Image available**
COMPRESSION PLATE ANASTOMOSIS APPARATUS AND RELATED SYSTEMS
Publication Year: 2001

11/6/9 (Item 8 from file: 349)
00738476 **Image available**
THORACIC TRAINING MODEL FOR ENDOSCOPIC CARDIAC SURGERY
Publication Year: 2000

11/6/10 (Item 9 from file: 349)
00565683
FLUID DELIVERY APPARATUS AND METHODS
Publication Year: 2000

11/6/11 (Item 10 from file: 349)
00531063 **Image available**
METHODS AND DEVICES FOR VASCULAR SURGERY
Publication Year: 1999

11/6/12 (Item 11 from file: 349)
00411639 **Image available**
CORONARY SHUNT AND METHOD OF USE
Publication Year: 1998

11/6/13 (Item 12 from file: 349)
00357798 **Image available**
A METHOD OF MAKING A LEFT VENTRICULAR ASSIST DEVICE
Publication Year: 1996

11/6/14 (Item 13 from file: 349)
00343374 **Image available**
DEVICES AND METHODS FOR PERFORMING A VASCULAR ANASTOMOSIS
Publication Year: 1996

14/6/1 (Item 1 from file: 348)
01324327
Catheter system and devices for providing cardiopulmonary bypass support
during heart surgery

14/6/3 (Item 3 from file: 348)
00746540
A CATHETER SYSTEM FOR PROVIDING CARDIOPULMONARY BYPASS PUMP SUPPORT
DURING HEART SURGERY

14/6/5 (Item 1 from file: 349)
00870291 **Image available**
MINIMALLY INVASIVE BYPASS SYSTEM AND RELATED METHODS
Publication Year: 2002

14/6/6 (Item 2 from file: 349)
00775491 **Image available**

MODULAR ACCESS PORT FOR DEVICE DELIVERY AND METHODS OF USE
Publication Year: 2001

14/6/7 (Item 3 from file: 349)
00773817 **Image available**
ENDOSCOPIC ARTERIAL PUMPS FOR TREATMENT OF CARDIAC INSUFFICIENCY AND VENOUS
PUMPS FOR RIGHT-SIDED CARDIAC SUPPORT
Publication Year: 2001

14/6/8 (Item 4 from file: 349)
00570540 **Image available**
SYSTEM AND METHOD FOR STIMULATION AND/OR ENHANCEMENT OF MYOCARDIAL
ANGIOGENESIS
Publication Year: 2000

14/6/9 (Item 5 from file: 349)
00532747 **Image available**
CARDIOVASCULAR CATHETER APPARATUS AND CATHETER POSITIONING METHOD USING
TISSUE TRANSILLUMINATION
Publication Year: 1999

14/6/10 (Item 6 from file: 349)
00529600 **Image available**
AUTOLOGOUS VASCULAR GRAFTS CREATED BY VESSEL DISTENSION
Publication Year: 1999

14/6/11 (Item 7 from file: 349)
00514485 **Image available**
TRANSILLUMINATION CATHETER AND METHOD
Publication Year: 1999

14/6/12 (Item 8 from file: 349)
00502158 **Image available**
FLUID JET CUTTING SYSTEM FOR CARDIAC APPLICATIONS
Publication Year: 1999

14/6/13 (Item 9 from file: 349)
00500698 **Image available**
IMPLANTABLE CEREBRAL PROTECTION DEVICE AND METHODS OF USE
Publication Year: 1999

14/6/14 (Item 10 from file: 349)
00483875 **Image available**
MAIN STAGE CATHETERIZATION INSTRUMENT
Publication Year: 1999

14/6/16 (Item 12 from file: 349)
00469121 **Image available**
METHOD AND APPARATUS FOR THE SURGICAL REPAIR OF ANEURYSMS
Publication Year: 1999

14/6/17 (Item 13 from file: 349)
00440823 **Image available**
BIOABSORBABLE HEMOSTATIC SEALING ASSEMBLY
Publication Year: 1998

14/6/18 (Item 14 from file: 349)
00414798 **Image available**
INSERTION ASSEMBLY AND METHOD OF INSERTING A HEMOSTATIC CLOSURE DEVICE INTO
AN INCISION
Publication Year: 1998

14/6/19 (Item 15 from file: 349)
00345603 **Image available**
TUBULAR ENDOLUMINAR PROSTHESIS HAVING OBLIQUE ENDS
Publication Year: 1996

14/6/20 (Item 16 from file: 349)
00314592
A CATHETER SYSTEM AND METHOD FOR PROVIDING CARDIOPULMONARY BYPASS PUMP
SUPPORT DURING HEART SURGERY
Publication Year: 1995

14/6/21 (Item 17 from file: 349)
00262728 **Image available**
DEFLECTABLE MEDICAL INSTRUMENT
Publication Year: 1994

14/6/22 (Item 18 from file: 349)
00204234 **Image available**
SELF EXPANDING VASCULAR ENDOPROSTHESIS FOR ANEURYSMS
Publication Year: 1992

14/6/23 (Item 19 from file: 349)
00191442
LUBRICIOUS ANTITHROMBOGENIC CATHETERS, GUIDEWIRES AND COATINGS
Publication Year: 1991

14/3,AB/2 (Item 2 from file: 348)
DIALOG(R) File 348:EUROPEAN PATENTS
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00863100
System for forming a bifurcated graft
System zur Herstellung eines abzweigenden Transplantats
Systeme pour la formation d'une greffe a deux branches
PATENT ASSIGNEE:
CARDIOVASCULAR CONCEPTS, INC., (1980220), 3260 Alpine Road, Portola
Valley, CA 94028, (US), (Proprietor designated states: all)
INVENTOR:
Fogerty, Thomas J., 3270 Alpine Road, Portola Valley, CA. 94028, (US)
Lenker, Jay A., 996 Coast View Drive, Laguna Beach, CA. 92651, (US)
Freislinger, Kirsten, Tennyson Avenue, Palo Alto, CA. 94301, (US)
LEGAL REPRESENTATIVE:
Sparing - Rohl - Henseler Patentanwalte (100366), Rethelstrasse 123,
40237 Dusseldorf, (DE)
PATENT (CC, No, Kind, Date): EP 792627 A2 970903 (Basic)
EP 792627 A3 971112
EP 792627 B1 000816
APPLICATION (CC, No, Date): EP 97108268 950602;
PRIORITY (CC, No, Date): US 255681 940608
DESIGNATED STATES: DE; FR
RELATED PARENT NUMBER(S) - PN (AN):

EP 686379 (EP 95108462)
INTERNATIONAL PATENT CLASS: A61F-002/06
ABSTRACT EP 792627 A2

A vascular graft comprises a perforate tubular compressible frame having a fabric liner disposed over at least a portion of the frames lumen. The graft may be used in combination with a base structure to form a bifurcated graft in situ. The base structure compresses a compressible frame having a fabric liner which defines a pair of divergent legs. The base structure is positioned within the aorta so that one leg enters each iliac. The tubular grafts can then be introduced into each leg to form the bifurcated structure. A graft delivery catheter includes a controllably flared sheath which facilitates recapture of a partially deployed graft .

ABSTRACT WORD COUNT: 107

NOTE: Figure number on first page: 1

LANGUAGE (Publication,Procedural,Application): English; English; English

FULLTEXT AVAILABILITY:

Available Text	Language	Update	Word Count
CLAIMS B	(English)	200033	221
CLAIMS B	(German)	200033	211
CLAIMS B	(French)	200033	257
SPEC B	(English)	200033	3625
Total word count - document A			0
Total word count - document B			4314
Total word count - documents A + B			4314

14/3,AB/4 (Item 4 from file: 348)

DIALOG(R)File 348:EUROPEAN PATENTS

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00727397

Vascular graft

Blutgef asstransplantat

Greffe vasculaire

PATENT ASSIGNEE:

CARDIOVASCULAR CONCEPTS, INC., (1980220), 3260 Alpine Road, Portola Valley, CA 94028, (US), (Proprietor designated states: all)

INVENTOR:

Fogerty, Thomas J., 3270 Alpine Road, Portola Valley, California 94028, (US)

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Freislinger, Kirsten, Tennyson Avenue, Palo Alto, California 94301, (US)

LEGAL REPRESENTATIVE:

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PATENT (CC, No, Kind, Date): EP 686379 A2 951213 (Basic)
EP 686379 A3 960306
EP 686379 B1 000809

APPLICATION (CC, No, Date): EP 95108462 950602;

PRIORITY (CC, No, Date): US 255681 940608

DESIGNATED STATES: DE; FR

RELATED DIVISIONAL NUMBER(S) - PN (AN):

EP 792627 (EP 97108268)

EP 1010406 (EP 99119747)

INTERNATIONAL PATENT CLASS: A61F-002/06

ABSTRACT EP 686379 A2

A vascular graft comprises a perforate tubular compressible frame having a fabric liner disposed over at least a portion of the frames

lumen. The graft may be used in combination with a base structure to form a bifurcated graft in situ. The base structure compresses a compressible frame having a fabric liner which defines a pair of divergent legs. The base structure is positioned within the aorta so that one leg enters each iliac. The tubular grafts can then be introduced into each leg to form the bifurcated structure. A graft delivery catheter includes a controllably flared sheath which facilitates recapture of a partially deployed graft. (see image in original document)

ABSTRACT WORD COUNT: 129

NOTE: Figure number on first page: 1

LANGUAGE (Publication,Procedural,Application): English; English; English

FULLTEXT AVAILABILITY:

Available Text	Language	Update	Word Count
CLAIMS B	(English)	200032	366
CLAIMS B	(German)	200032	402
CLAIMS B	(French)	200032	399
SPEC B	(English)	200032	4024
Total word count - document A			0
Total word count - document B			5191
Total word count - documents A + B			5191

File 348:EUROPEAN PATENTS 1978-2002/Sep W01

File 349:PCT FULLTEXT 1983-2002/UB=20020905,UT=20020829

Set	Items	Description
S1	17755	BLOOD() VESSEL OR AORTA
S2	7741	ENDOSCOP?
S3	1905	ANASTOMOS?
S4	1158	(ILIAC OR ILIUM) (5N) (ARTERI??? OR ARTERY)
S5	4127	(FEMUR OR FEMORAL) (5N) (ARTERY OR ARTERI???)
S6	105	INGUINAL() LIGAMENT?
S7	379430	CONDUIT? ? OR TUBE? ? OR TUBING OR TUBELIKE OR PIPETTE? ? - OR PIPET? ? OR DUCT? ?
S8	29738	BYPASS
S9	29996	GRAFT? ?
S10	294	S1(S) S2
S11	14	S10(S) S3
S12	28	S10(S) S4: S6
S13	28	S7: S9 AND S12
S14	23	S13 NOT S11